



REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to: Mail Stop RCE Commissioner for Patents P.O. 1450 Alexandria, VA 22313-1450

Application No.	09/667,050
Filing Date	September 21, 2000
First Named Inventor	Zohar Bogin
Art Unit	2187
Examiner Name	Kimberly N. McLean-Mayo
Attorney Docket Number	42390P9415

Request	for Continu	ied Ex	or Continued Examination (RC amination (RCE) practice under 37 CFF application. See Instruction Sheet for R	₹§ 1.1	14 d	oes not a	apply to a	any utility or	plant application file	
a. n a. m b.	mendments of wish to have be considered with the hard property of the ha	s enclosed control of the colosed colose	dendment/Reply davit(s)/Declaration(s) ion of action on the above-identifier (Period of suspension shall not except the extended of the exten	iii. iv. d appleced in the following street by the following street street in the following street in	in who need to the control of the co	Inform Other Other F.R. § ing fee any add public.	were file cant must any ame 16 previous for	ed unless apt request not request not not not not not not not not not no	policant instructs oth n-entry of such ame led after the final (on August 5, 200 on August 5, 200 on August 6, 200 on August 7, 200 on August	erwise. If applicant does indment(s). Office action 13 for a period of d) posit Account No. 67050 770.00 0P
included on this form. Provide credit card information and authorization on PTO-2038. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED										
Name	(Print/Typ	9 <i>6</i>) N	Michael J. Mallie				_		(Attorney/Agent) 3	5 591
Signatu	ire	+	Q-				Date		June 10, 200	
			CERTIFICATE O	F MA	ILIN	G OR T	RANSM	IISSION		
			respondence is being deposited with the period of the peri							
Name	(Print/Type	9)	Afigela M. Quinn				, .	·		

Date

June 10, 2004

Signature

EEE TO ANOM	ITTAI	Complete if Known				
FEE TRANSM	IIIIAL	Application Number	09/667,050			
for FY 20	04	Filing Date	September 21, 2000			
Effective 10/01/2004. Patent fees are subje	ct to annual revision.	First Named Inventor	Zohar Bogin			
Applicant claims small entity status	See 37 CFR 1.27.	Examiner Name	Kimberly N. JUN 2 2 2004			
	(4)	Art Unit	2187			
TOTAL AMOUNT OF PAYMENT	(\$) 2,100.00	Attorney Docket No.	42390P9415			

METHOD OF DAVMENT (sheek all that apply)	EEE CALCUL ATION (continued)							
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)							
Check Credit card Money Other None	3. ADDITIONAL FEES							
Deposit Account	Large	e Entity	Sma	II Entity	<u>′</u>			
	Fee	Fee	Fee	Fee	_			
Deposit Account 02-2666	Code	(\$)	Code	(\$)	Fee	e Description		Fee Paid
Number	1051	130	2051	65	Surcharge - late filing			
Deposit Account Plately Salvaloff Toylor & Zofman LLD	1052	50	2052	2 25	Surcharge - late prov cover sheet.	isional filing tee or		
Account Name Blakely, Sokoloff, Taylor & Zafman LLP	2053	130	2053	130	Non-English specifica	ation		
The Commissioner is authorized to: (check all that apply)	1812	2,520	1812	2,520	For filing a request for	r <i>ex parte</i> reexamin	nation	
Charge fee(s) indicated below Credit any overpayments	1804	920 *	1804	920	 Requesting publication 	on of SIR prior to		
Charge any additional fee(s) or underpayment of fees as required under 37	4005	1,840 *	4005	1,840	_	on of SID after		L
CFR §§ 1.16, 1.17, 1.18 and 1.20. Charge fee(s) indicated below, except for the filing fee	1805	1,040	1805	1,040	Examiner action	on or sin alter		
to the above-identified deposit account	1251	110	2251	55	Extension for reply wi	thin first month		
FEE CALCULATION	1252	420	2252	210	Extension for reply within second month			
1. BASIC FILING FEE	1253	950	2253	475	Extension for reply wi	thin third month		
Large Entity Small Entity	1254	1,480	2254	740	Extension for reply wi	thin fourth month		
Fee Fee Fee Fee <u>Fee Description</u> Fee Paid Code (\$)	1255	2,010	2255	1,005	Extension for reply wi	thin fifth month		
	1404	330	2401	165	Notice of Appeal			
1001 770 2001 385 Utility filing fee 1002 340 2002 170 Design filing fee	1402	330	2402	165	Filing a brief in suppo	ort of an appeal		
1002 540 2002 170 Design mining fee	1403	290	2403	145	Request for oral hear	ing		
1004 770 2004 385 Reissue filing fee	1451	1,510	2451	1,510	Petition to institute a	public use proceed	ling	
1005 160 2005 80 Provisional filling fee	1452	110	2452	55	Petition to revive - un	avoidable		
1 <u></u>	1453	1,330	2453	665	Petition to revive - un	intentional		1,330.00
SUBTOTAL (1) (\$)	1501	1,330	2501	665	Utility issue fee (or re	issue)		
2. EXTRA CLAIM FEES Extra Fee from	1502	480	2502	240	Design issue fee			
Ctairns below Fee Paid	1503	640	2503	320	Plant issue fee			
Total Claims _ 20° = 0 x 18.00 = \$0.00	1460	130	2460	130	Petitions to the Comm	nissioner		
Independent 3* = 0 x 86.00 = \$0.00	1807	50	1807	50	Prosessing fee under	37 CFR 1.17(q)		
Multiple Dependent	1806	180	1806	180	Submission of Inform	ation Disclosure St	mt	
Large Entity Small Entity	8021	40	8021	40	Recording each pater			
Fee Fee Fee Fee <u>Fee Description</u> Code (\$) Code (\$)			Ī		property (times numb			
	1809	770	1809	385	Filing a submission af (37 CFR § 1.129(a))	ter final rejection		1
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1810	770	2810	385	For each additional in	vention to be		<u> </u>
1203 290 2203 145 Multiple Dependent claim, if not paid					examined (37 CFR §			
1204 86 2204 43 **Reissue independent claims over original	1801	770	2801	385	Request for Continue	d Examination (RC	E)	770.00
patent	1802	900	1802	900	Request for expedited			
1205 18 2205 9 **Reissue claims in excess of 20 and over original patent	 .	ا ۱	1		of a design application	ı		
	Other fe	Other fee (specify)						
SUBTOTAL (2) (\$) 0.00	*Bertiner	by Basic Film	a Fee Pair	d		SUBTOTAL (3)	(\$)	0.400.05
**or number previously paid, if greater, For Reissues, see below	*Reduced by Basic Filing Fee Paid			-		000101AE (3)	(4)	2,100.00
SUBMITTED BY						Comp	lete (if applica	ible)
Name (Print/Type) Michael J. Mallie		egistratio ttomey/Age		3	36,591	Telephone	(408) 720-8300	
Signature						Date	0/04	